## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

**CLAIMS AS FILED - PART I** 

Application or Docket Number

10634768

| CLAIMS AS FILED - PART I  |  |  |                                    |  |                      | mn (1)                                 | SMALL ENTITY TYPE  OF |                                 |                        |                | OTHER THAN                     |                        |
|---|--|--|------------------------------------|--|----------------------|--|-----------------------|---------------------------------|------------------------|----------------|--------------------------------|------------------------|
| TOTAL CLAIMS  |  |  | (Column 1)                         |  | (Column 2)           |  |                       |                                 |                        | OR             | SMALL                          |                        |
|   |  |  | _                                  |  |                      |  | -                     | RATE                            | FEE                    |                | RATE                           | FEE                    |
| FOR   |  |  | NUMBER FILED                       |  | NUMBER EXTRA         |  | BA                    | ASIC FEE                        | 375.00                 | OR             | BASIC FEE                      | 750.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |  | 20minus 20=                        |  | * 0                  |  |                       | X\$ 9=                          |                        | OR             | X\$18=                         | ,                      |
| INDEPENDENT CLAIMS  |  |  | minus 3 =                          |  | <i>'</i>             |  |                       | X42=                            |                        | OR             | X84=                           |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |  |                                    |  |                      |  | -                     | +140=                           |                        | OR             | +280=                          |                        |
| * If  | the difference                                 | in column 1 is   | less than ze                       | ero, enter "0" in column 2             |                      |  | <u> </u>              | OTAL                            |                        | OR             | TOTAL                          | 750                    |
| CLAIMS AS AMENDED - PART II   |  |  |                                    |  |                      |  |                       | 0                               |                        | 1011           | OTHER                          | /                      |
|   | ,  | (Column 1)   |                                    | lumn 2) (Column 3)                     |                      |  | SMALL ENTITY          |                                 |                        | R SMALL ENTITY |                                |                        |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |                                    | HIGH<br>NUM<br>PREVIO<br>PAID          | IEST<br>BER<br>OUSLY | PRESENT<br>EXTRA                       | I                     | RATE                            | ADDI-<br>TIONAL<br>FEE |                | RATE                           | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *  | Minus                              | **                                     |                      | =                                      | ;                     | X\$ 9=                          |                        | OR             | X\$18=                         |                        |
|   | Independent                                    | *  | Minus                              |  |                      | =                                      |                       | X42=                            |                        | OR             | X84=                           |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |  |                                    |  |                      |  |                       | ⊦140=                           |                        | OR             | +280=                          |                        |
| TOTAL ADDIT. FEE  |  |  |                                    |  |                      |  |                       |                                 |                        | OR             | TOTAL<br>ADDIT. FEE            |                        |
|   |  | AD   | DII. FEE                           |  |                      | ADDII. FEET                            |                       |                                 |                        |                |                                |                        |
| AMENDMENT B   | : .  | (Column 1) CLAIMS REMAINING AFTER AMENDMENT  |                                    | (Colui<br>HIGH<br>NUM<br>PREVI<br>PAID | IEST<br>BER<br>OUSLY | PRESENT EXTRA                          | ı                     | RATE                            | ADDI-<br>TIONAL<br>FEE |                | RATE                           | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *  | Minus                              | **                                     | -                    | =                                      | ;                     | X\$ 9=                          |                        | OR             | X\$18=                         |                        |
|   | Independent                                    | *  | Minus                              | ***                                    | F OL A144            | =                                      |                       | X42=                            |                        | OR             | X84=                           |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |                                    |  |                      |  |                       | -140=                           |                        | OR             | +280=                          |                        |
| π   |  |  |                                    |  |                      |  |                       |                                 |                        |                | TOTAL                          |                        |
| ADDIT.  |  |  |                                    |  |                      |  |                       |                                 |                        | ٠              | ADDIT. FEE                     |                        |
|   |  | (Column 1)<br>CLAIMS   |                                    | (Colui                                 |                      | (Column 3)                             | _                     |                                 |                        |                |                                |                        |
| AMENDMENT C   |  | REMAINING<br>AFTER<br>AMENDMENT  |                                    | NUM<br>PREVI<br>PAID                   |                      | PRESENT<br>EXTRA                       | F                     | RATE                            | ADDI-<br>TIONAL<br>FEE |                | RATE                           | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *  | Minus                              | **                                     |                      | =                                      | ;                     | X\$ 9=                          | 1                      | OR             | X\$18=                         |                        |
| ME  | Independent                                    | *  | Minus                              | ***                                    |                      | =                                      |                       | X42=                            |                        |                | X84=                           |                        |
| Ľ   | FIRST PRESE                                    | NTATION OF M   | ULTIPLE DEI                        | PENDEN                                 | Γ CLAIM              |  | $\vdash$              |                                 |                        | OR             | 7,07-                          |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |  |  |                                    |  |                      |  |                       |                                 |                        | OR             | +280=                          |                        |
| **  | If the "Highest Nu<br>If the "Highest Nu       | mber Previously P<br>imber Previously P<br>inber Previously Pa<br>nber Previously Pa | aid For" IN THI<br>aid For" IN THI | S SPACE<br>IS SPACE                    | is less tha          | an 20, enter "20."<br>an 3, enter "3." | ADI                   | TOTAL<br>DIT. FEE<br>in the app | propriate box          |                | TOTAL<br>ADDIT. FEE<br>lumn 1. |                        |